Adopted Rejected

COMMITTEE REPORT

YES: 7 NO: 4

MR. SPEAKER:

Your Committee on <u>Insurance</u>, to which was referred <u>House Bill 1159</u>, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill **be amended** as follows:

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1
             Page 7, delete lines 34 through 42.
 2
             Page 8, delete line 1.
 3
             Page 8, line 26, delete "do the following:" and insert "comply with
 4
          subdivision (1) or subdivision (2):".
             Page 8, line 27, after "(1)" insert "Do all of the following:
 5
 6
 7
             Page 8, line 29, delete "(A)", begin a new line triple block indented
 8
          and insert:
 9
                     "(i)".
10
             Page 8, line 34, delete "(B)", begin a new line triple block indented
          and insert:
11
12
                     "(ii)".
             Page 8, line 39, delete "(2)", begin a new line double block indented
13
14
          and insert:
                   "(B)".
15
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1	Page 8, line 39, delete "subdivision (3)," and insert "clause (C),".
2	Page 8, line 40, delete "subdivision (1)" and insert "clause (A)".
3	Page 9, line 1, delete "(3)", begin a new line double block indented
4	and insert:
5	"(C)".
6	Page 9, line 2, delete "subdivision (1)" and insert "clause (A)".
7	Page 9, between lines 4 and 5, begin a new line block indented and
8	insert:
9	"(2) Do all of the following:
10	(A) Specify in an agreement with a provider under this
11	chapter that the logo or other identifying symbol of the
12	preferred provider plan will be placed on the health benefit
13	card of each individual who has access to the provider and
14	associated discount through the agreement.
15	(B) Require any person, including an insurer, a third party
16	administrator, an affiliate of the preferred provider plan,
17	or another preferred provider plan to place the logo or
18	other identifying symbol of the preferred provider plan on
19	the health benefit card of each individual who has access to
20	the preferred provider plan's providers and associated
21	discounts.
22	(C) Obtain a provider's express written consent before the
23	preferred provider plan modifies the fee schedule,
24	discount, or other benefit agreed to by the provider with
25	the preferred provider plan.".
26	Page 9, delete lines 17 through 19.
27	Renumber all SECTIONS consecutively.
	(Reference is to HB 1159 as introduced.)

and when so amended that said bill do pass.

Representative Fry

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